

FILED

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

1. Corporation Name

BUTTLAR CORPORATION

Principal Place of Business

Mailing Address

C/O DREW DRAKE
8685 COLLEGE PARKWAY, SUITE 355
FT MYERS FL 33919

C/O DREW DRAKE
8695 COLLEGE PARKWAY, SUITE 355
FT MYERS FL 33919

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/06/1997

4. FEI Number

Applied For	
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Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SEEMANN, ERNEST A
4729 DEL PRADO BLVD
CAPE CORAL FL 33904

81	Name	Seemann & Schutt, P.A.
82	Street Address (P.O. Box Number is Not Acceptable)	1105 Cape Coral Parkway E
83		Suite C
84	City	Cape Coral
		FL
85	Zip	33914

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input type="checkbox"/> DELETE
NAME	VON BUTTLAR, ULRICH	
STREET ADDRESS	C/O DREW DRAKE, 8895 COLLEGE PARKWAY, #355	
CITY - ST - ZIP	FT MYERS FL 33919	

1.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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TITLE ☐ DELETE
NAME
STREET ADDRESS C/O Seeman + Schutt P.A.
CITY - ST - ZIP 4105 Cape Coral Parkway E. Su

2.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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TITLE	CAPE CORAL FL 33904	DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

3.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

4.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

51 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

6.1 TITLE ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address change.

Ulrich von Buttlar

SIGNATURE: *Alfred von Keller* Schultenhardtstr. 1 03/10/1999 2231/953784

CR2E034 (10/97)